Childhood Obesity: Serious Consequences

Community Forums: Food, Fitness and Our Kids Kennewick, Washington June 14,2004

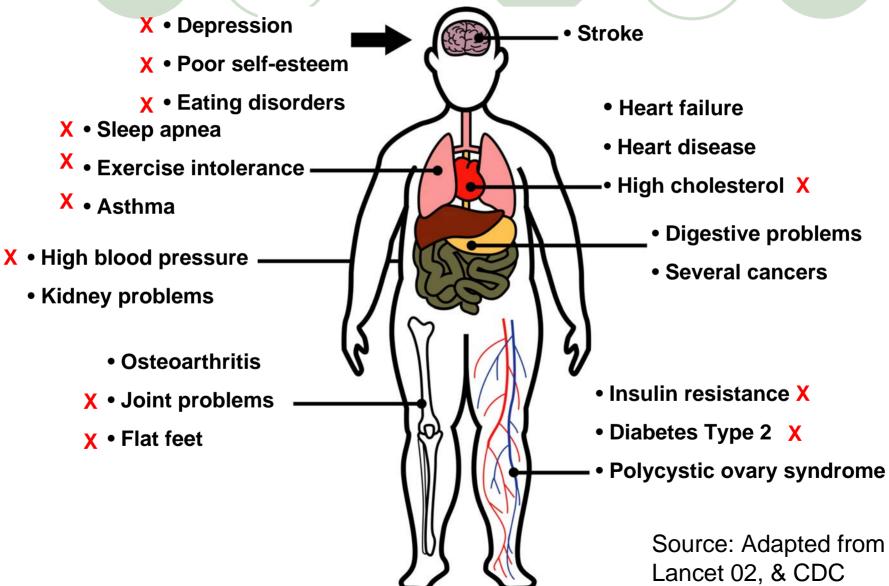
Today's presentation will:

- Demonstrate the extent of the problem
- Explain how overweight/obesity occurs
- Share the consequences of this epidemic:
 - OHealth
 - **O**Economic
 - Socioeconomic
- Describe the schools' role in addressing this epidemic



"This generation of children may be the first to have a shorter life expectancy than their parents".

Associations between excess weight and disease



Here is your chance to get ahead of SB 5436

- Each District's Board of Directors needs to establish its own policy by August 1, 2005.
- The policy needs to cover access to nutritious foods, exercise, and accurate information related to these topics.



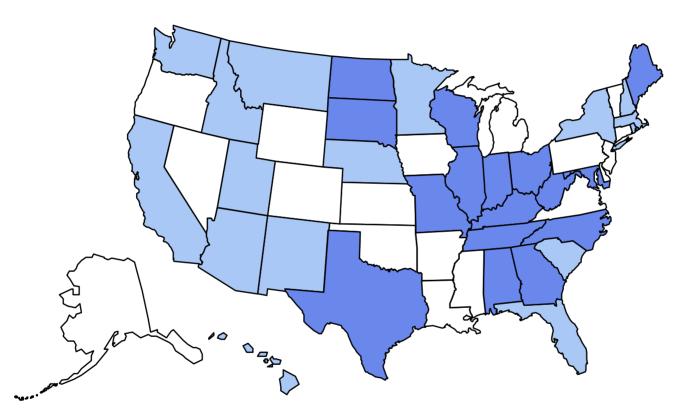
Food, Fitness and our Kids:

- You will have a chance to indicate which areas you would like to explore further.
- We will divide into groups to talk about the area's importance and how we might explore it further.

Audience

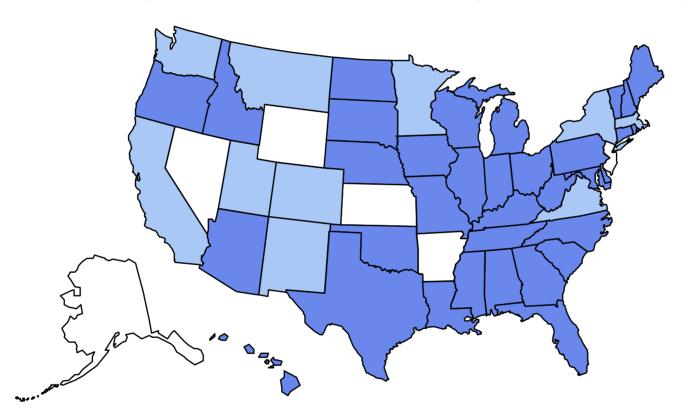
- Teachers
- Administration
- School Board Members
- School Food Service
- School Nurses
- Other School Staff
- Dietitians
- Community Members

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)

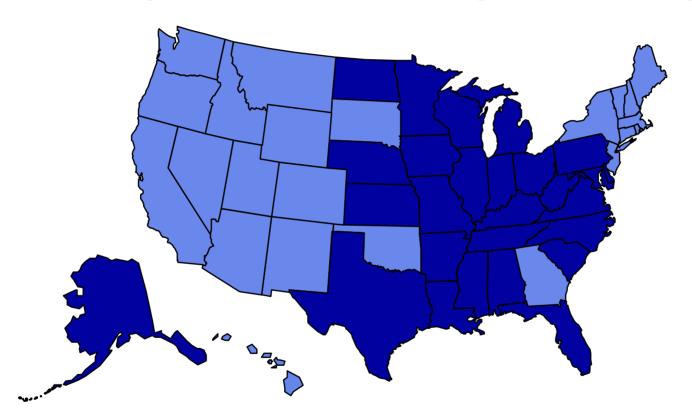




BRFSS, 1990 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)

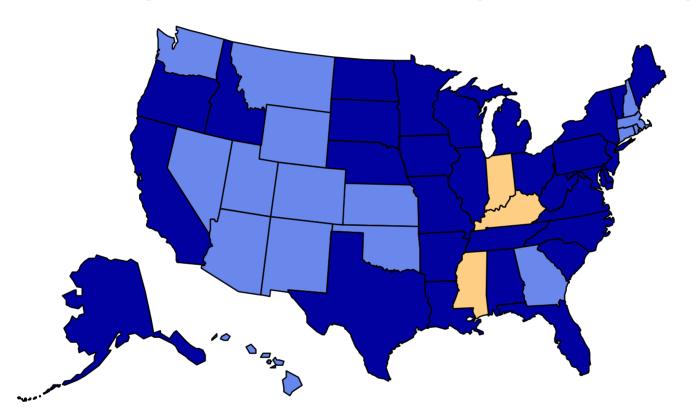


BRFSS, 1995 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)



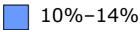


BRFSS, 1997 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)



No Data



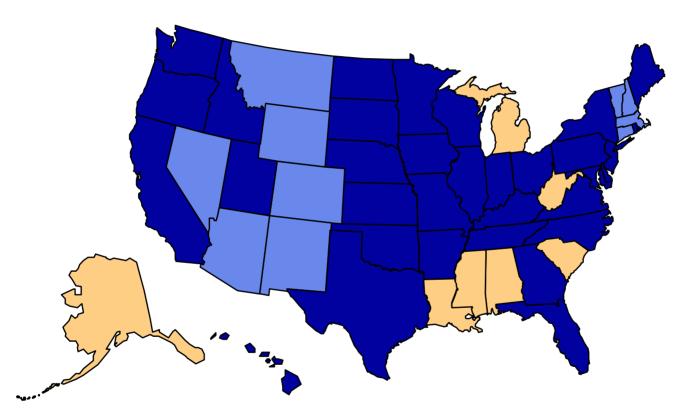




15%-19%



BRFSS, 1998 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)



No Data



10%-14%

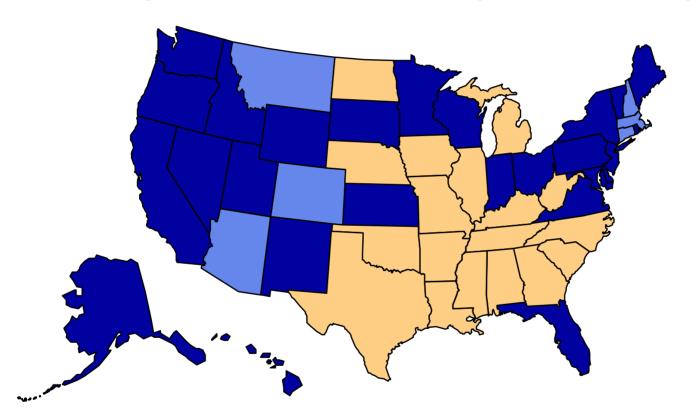


15%-19%



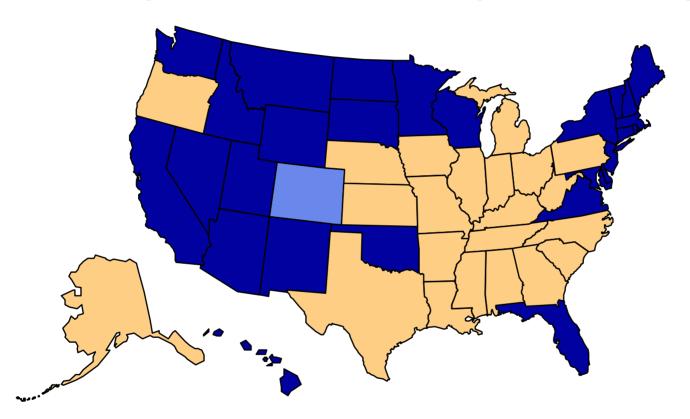
BRFSS, 1999 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)

≥20





BRFSS, 2000 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)



No Data



10%-14%

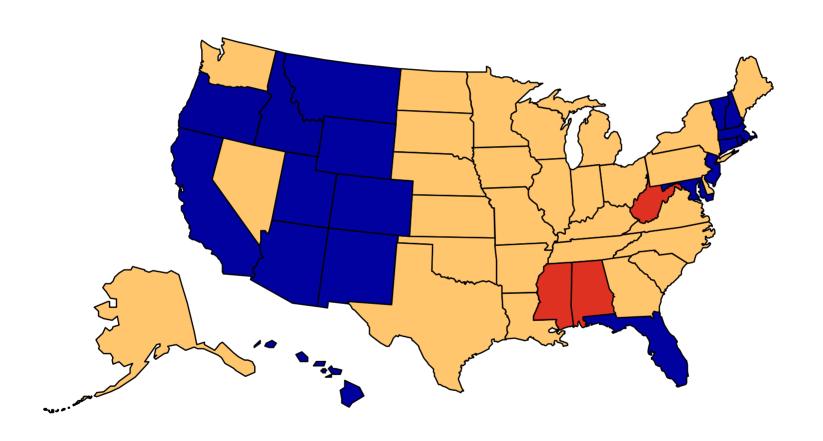


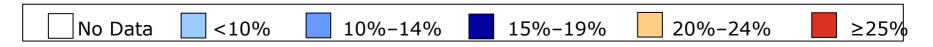
15%-19%



≥20

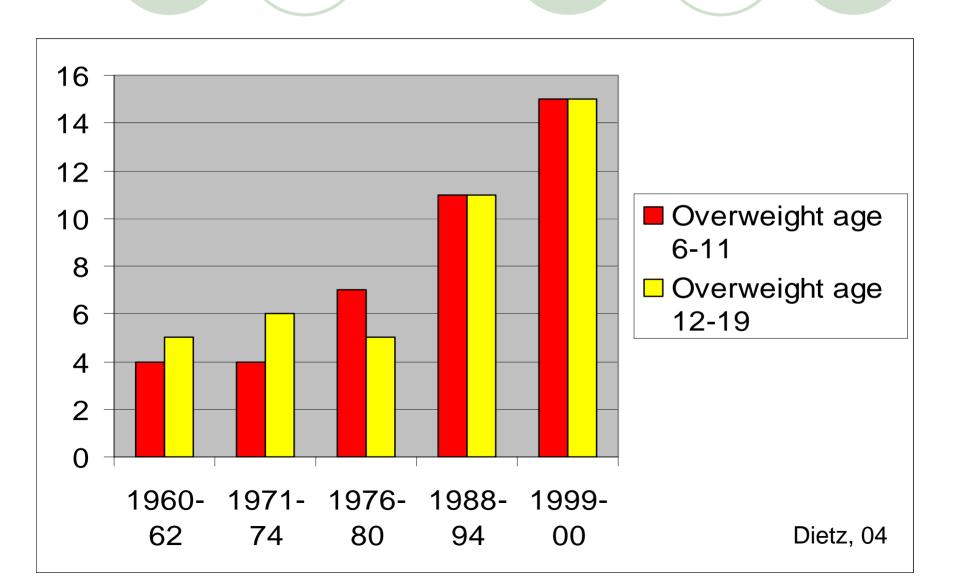
BRFSS, 2002 (*BMI ≥30, or ~ 30 lbs overweight for 5' 4" woman)





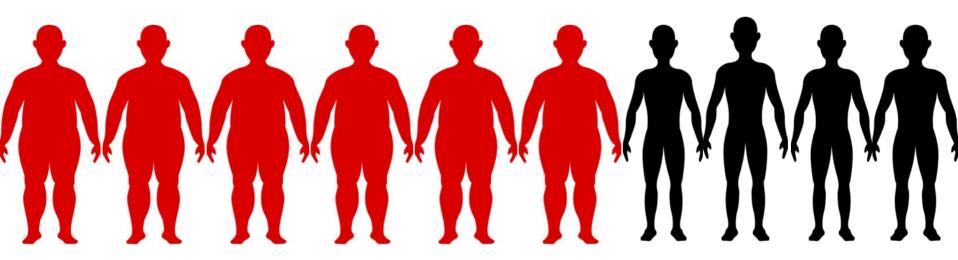
Percent of Overweight Children in US

(Overweight: BMI > sex- & age-specific 95% cutoff)



Washington State Data

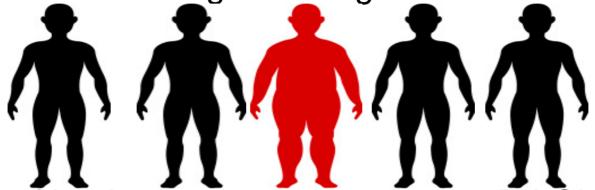
- 6 of 10 adults are overweight or obese
- 62% of adults in Benton and Franklin counties are obese (BRFFS 2004)



Source: CDC BRFFS, 2002

Washington State Data

 Over 20% of high school students are overweight or at risk of becoming overweight



- 32% of kindergarten students in one Tri-City school were overweight (2004)
- 21.2% of children age 1-5 on WIC in Benton and Franklin Counties are at risk for being overweight or becoming overweight
- 8 out of 10 overweight children will become obese adults
 - Obesity is a more serious condition.

Why Does Overweight and Obesity Matter?



Why it Matters: Lifelong Effects

- Overweight kids are at increased risk of premature death caused by heart disease as an adult
- 60% of overweight children and adolescents have already developed a risk factor for cardiovascular disease, including:
 - OHigh blood pressure
 - OHigh cholesterol
 - Olnsulin resistance: "pre-diabetes"

Source: DiPietro, Dietz '04

Why it Matters: Societal Burden

 Not only will these disease processes in childhood result in greater harm to the individual, it will add a considerable burden and cost to our society





Source: Dietz, NEJM 2004

Why it Matters: Academics

- Overweight children have significantly lower math and reading test scores compared to non-overweight children in kindergarten
- Children who are gaining weight rapidly have increased behavioral and learning difficulties



Washington's Economic Cost

 Annual estimate of medical expenditures attributable to obesity for Washington State <u>alone</u>: Over \$1.3 billion dollars

Source: Finkelstein 04



Why it Matters: Self-Image

- Overweight young children (5 years old):
 - ODevelop a negative self-image
 - Perceive themselves to have a lower cognitive ability
- Overweight adolescents:
 - OHave a lower self-esteem associated with sadness, loneliness, and nervousness
 - Are likely to participate in high risk behaviors

Sources: Davison et al: Peds 2001,

Strauss et a: Peds 00



Why it Matters: Socioeconomics

- Once adults, overweight female adolescents compared to those of healthy weights, have been shown to:
 - Complete fewer years of schooling
 - OHave substantially lower household incomes
 - OHigher rates of poverty





Source: Gortmaker et al. NEJM '93

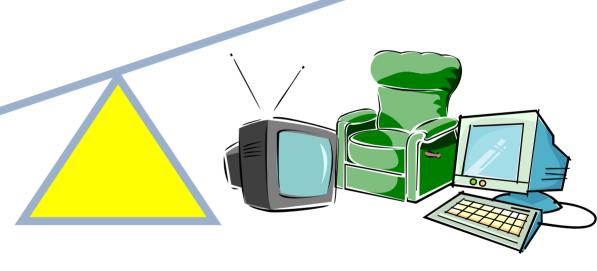
How Did This Happen?

Weight gain:

Energy Out

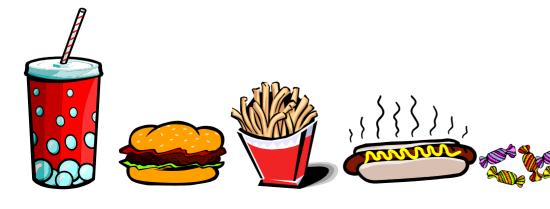
Energy In





What are Kids Eating?

- 1 in 4 adolescents drink more than 325 calories of soda per day
 - Soda is the leading source of added sugar in the American adolescent diet
- Added sugars contribute 20% of the calories consumed by children



Source: Bowman, Peds 04; FNS report to congress 01; CDC

YRBS '01

What are Kids Eating?

- Each day, over 30% of children and adolescents eat fast food
 - On days that children eat fast food, they consume substantially more calories and have a worse diet quality compared to days when they do not eat fast food.



What are Kids Eating?

- 2% of kids meet the Food Guide Pyramids recommendations for all 5 food groups
- Only 20% of kids eat the recommended 5 servings (minimum) of fruits and vegetables per day

Sources: FNS report to congress 01, CDC YRBS '01

What is the Obesity Solution?

Prevention!

 Establish policies and environments that promote healthy eating and physical activity throughout our communities

Schools Have a Pivotal Role

- Assessing the environment and making changes
- School policies can help to prevent childhood obesity by supporting opportunities for healthy meals, physical activity and health education.
- Healthy habits are learned young begin reinforcing them in school!

Where Do We Start?

- You may want to start with an idea that will:
 - Fit into your larger plan
 - Be accepted and supported
 - Yield results
 - Be easier rather than harder to implement
 - Has a track record
 - Can be adapted as needed

Exploration Process

- Good news! Great resources have already been developed.
- We have a wide range of expertise in our State.



What is the school's role?

- Schools uniquely positioned to model and reinforce healthy eating and PA behaviors.
- Children consume at least two meals at school plus snacks.
- Can't always influence what happens at home and in community – can influence what happens in school.
- Schools have a huge impact on children's behaviors and attitudes.
- Nutr., PA impacts health and LEARNING!

A Comprehensive Nutrition and Physical Activity Program

- 1. Emphasize proper nutrition and physical activity as a priority.
- 2. Ensure quality school meals.
- 3. Monitor competitive food sales.
- 4. Provide an environment conducive to good health.
- 5. Support nutrition education and physical education.
- 6. Promote healthy eating and physical activity.
- 7. Explore revenue-generating alternatives.
- 8. Assess the district's nutrition and physical activity programs.



Washington State models

- Olympia, Washington
- Everett, Washington
- Bellevue, Washington
- Othello, Washington
- Spokane, Washington
- Seattle, Washington